



Charles County Department of Emergency Services STANDARD OPERATING PROCEDURES

Section 300 - Employee Health & Safety

| Health & Wellness Programs - 300.00 | | |
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| S.O.P. # 300.03 | Critical Incident Stress Management | PAGE: 1 OF 4 |
| EFFECTIVE: 06/04/2011 | Authorized: John Filer, Chief | |
| REVISED: 01/24/2017 | Authorized: William Stephens, Director | |

300.03.01 Purpose

The purpose of this SOP is to inform uniformed and non-uniformed public safety personnel about the Critical Incident Stress Management (CISM) process, policies, and procedures for Charles County. It will also provide the scope of practice made available through the Maryland Critical Incident Stress Management Team (MCISM) and the members of the Southern Maryland Regional Team within the MCISM.

300.03.02 Definition of Terms

1. **Defusing:** A defusing is a brief process, focusing on education and information. A defusing should be performed immediately after a critical incident with the purpose of offering education, information, support and assess to a formal debriefing. Defusing should last only 15 to 30 minutes.
2. **Debriefing:** A debriefing is a formal, formatted, specific and confidential process performed by the MCISM Team after a critical incident with the purpose of aiding a group of responders in the healing process or to prevent post-traumatic stress. Optimally debriefings are to take place forty eight (48) to seventy two (72) hours after the incident. The debriefing process allows the providers to express what they did, what they saw, and how they felt. This is done in a group forum to allow the discussion to take place freely among the providers. The MCISM team members facilitate this discussion and provide positive feedback when appropriate.
3. **Crisis Concern Telephone Calls:** There may be situations where one or two individuals that responded or where involved in an incident appear to be adversely affected by the incident. When this is the case, a one-on-one crisis concern phone call may be appropriate. Usually, a peer support person (PSP) or other concerned fellow emergency worker, places a call seeking assistance from the MCISM Team.
4. **Public Safety Personnel/Responder:** Personnel involved in the prevention of and protection from events that could endanger the safety of the general public from significant danger, injury or harm. These persons include but are not limited to police officers, firefighters, EMS providers, animal control officers and public safety dispatchers.
5. **Singular Provider Event:** A defusing or debriefing for a single affected provider who requires the services of trained mental health professionals.



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300.03.03 General

1. The Maryland Critical Incident Stress Management (MCISM) program is based on a team approach, consisting of mental health professionals and peer support personnel. The MCISM team provides multiple services for emergency service workers, e.g., defusing, debriefings, referrals, and education. These services are performed in conjunction with fire, police and EMS departments and providers across the state. The coordination of the MCISM team is conducted by the Maryland Institute of Emergency Medical Services Systems (MIEMSS).
2. There are strong indications that more than 86% of emergency services personnel experience some emotional cognitive or physical reaction after responding to certain calls.* These calls have the potential to create a state of psychological distress which will cause the provider to become concerned about his or her health. It is extremely important that when providers are having unusual or intense reactions to a certain call or an accumulation of calls, that the MCISM team be notified. The major stressors of emergency workers may include but are not limited to:
 - i. Death or serious injury of a fellow colleague
 - ii. Suicide of a fellow coworker
 - iii. Multiple casualty incidents
 - iv. Death or serious injury to children
 - v. Familiarity with the victims
 - vi. Prolonged rescue work
 - vii. Exposure to dismemberment

*http://miemss.org/home/Portals/0/Docs/OtherPDFs/CISM_Protocol.pdf (Section 1.2)

300.03.04 Policy for Requesting a CISM Team

1. Any public safety personnel/responder, directly or indirectly involved with an incident may activate the CISM team if they feel it is necessary and/or beneficial to the mental health and well-being personnel involved. The team may be activated at any time during or after the incident.
2. Request for a CISM team activation shall be done by contacting the Charles County 911 Communications Center.
3. The 911 Communications Center will make the formal request for a CISM Team through SYSCOM (877) 840-8245.
4. Exceptional cases may exist where an individual provider may contact SYSCOM directly for a private session. In this situation the CISM activation is characterized as a singular provider event and not a CISM Team activation.
5. In all cases, SYSCOM must be notified of any CISM session conducted by any CISM team member to ensure confidentiality protection and to operate in compliance with the CISM policies and procedures as set by MIEMSS.



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300.03.05 Charles County CISM Team Responsibilities & Expectations

1. The primary objective of the local CISM team is to provide defusing, debriefing and CISM related functions to public safety and emergency personnel in a professional, equitable, courteous and expeditious manner.
2. It is the expectation of the EMS Operational Program (EMSOP) that all public safety personnel affected by an incident will be afforded the services of the CISM Team once activated.
3. The local CISM Team and its members shall be recognized by, properly trained, credentialed and function in accordance with the Charles County CISM Team SOP's, all State guidelines, policies and best practices regarding CISM as established by the MCISM and MIEMSS.
4. Once contacted by the MCISM Regional Coordinator, the local CISM Team Leader or their recognized designee shall;
 - i. Assess the scope of CISM services needed and procure any additional resources through coordination with the Regional MCISM Coordinator and/or the Charles County 911 Center.
 - ii. Identify and procure, if necessary, an appropriate venue for the CISM process to take place.
 - iii. Through coordination with the Charles County 911 Center, make notification and offer services to all public safety personnel involved in the incident.
 - iv. Make courtesy notification to the affected stations and/or agencies chief officers.
5. If career personnel are involved in the CISM process, the CISM Team Leader and/or his/her designee will contact the Medical Duty Officer and the 911 Communications Supervisor to arrange proper shift coverage for the affected employees.
6. If Law Enforcement personnel are involved in the CISM process, the CISM Team Leader and/or his/her designee will contact the Charles County Sheriff's Office Shift Commander to arrange proper shift coverage for the affected employees.
7. In the event a CISM Team is activated outside of the parameters of this SOP, the CISM Team Leader will make proper notification to the Charles County 911 Center and SYSCOM.

300.03.06 Indications for Possible Intervention from the CISM Team

1. Feelings of anger
2. Embarrassment
3. Anxiety
4. Frustration
5. Blaming of one self
6. Unable to get good rest, and/or sleep
7. Guilt
8. Nightmares
9. Depression



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300.03.07 Contraindications

1. The MCISM coordinators and their team members should not force this concept on the providers who are not reacting in an unusual manner.
2. Providers that do not exhibit any unusual reactions.
3. Only in very rare situations will debriefings be made mandatory and only in consultation with the MCISM Coordinator.

300.03.08 Confidentiality

1. All debriefing sessions are held in the strictest confidence.
2. All participants must agree to keep the names of persons participating in the session and the content of the session confidential.
3. Press and media personnel are never permitted to attend a CISM session.
4. Personnel not directly involved in the incident are not permitted to attend a CISM session.